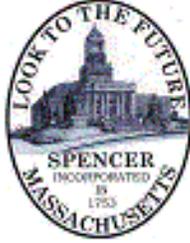


**TOWN OF SPENCER**  
*Office of Development & Inspectional Services*

*Planning Board  
Zoning Board of Appeals  
Conservation Commission  
Board of Health*

*Town Planner  
Inspector of Buildings  
Health Agent  
Wetland/Soil Specialist*



*Memorial Town Hall  
157 Main Street  
Spencer, MA 01562*

*Tel: 508-885-7500 ext. 180  
Fax: 508-885-7519*

**APPLICATION FOR AN ADMISTRATIVE APPROVAL UNDER §2.4 OF THE REGULATIONS**

**1. Applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**2. Project Location:**

\_\_\_\_\_

**3. Project Description: (attach additional sheets if necessary):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Attach a map or maps that show the location of the project on the property and the location of all resource areas and buffer zones and the distance from the resource area(s) to the project.**

**5. Signature, printed name of property owner and date:**

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed name

The Above Project is hereby approved/not approved:

\_\_\_\_\_  
Conservation Agent

Date: \_\_\_\_\_

Note: This approval is valid for three years from the date of approval. If not approved, appeal may be taken in writing to the Conservation Commission.